

# PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docking Number

10783406

## CLAIMS AS FILED - PART I

|                                  | (Column 1)      | (Column 2)               |
|----------------------------------|-----------------|--------------------------|
| TOTAL CLAIMS                     | 20              |                          |
| FOR                              | NUMBER FILED    | NUMBER EXTRA             |
| TOTAL CHARGEABLE CLAIMS          | 20 - minus 20 = | 0                        |
| INDEPENDENT CLAIMS               | 3 - minus 3 =   | 0                        |
| MULTIPLE DEPENDENT CLAIM PRESENT |                 | <input type="checkbox"/> |

\* If the difference in column 1 is less than zero, enter "0" in column 2

## CLAIMS AS AMENDED - PART II

11/11/04

|  | (Column 1)                       | (Column 2)                         | (Column 3)               |
|--|----------------------------------|------------------------------------|--------------------------|
| AMENDMENT A                                    | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA            |
| Total  | 20                               | Minus                              | 20 =                     |
| Independent                                    | 3                                | Minus                              | 3 =                      |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |                                  |                                    | <input type="checkbox"/> |

SMALL ENTITY TYPE ☐

OR OTHER THAN SMALL ENTITY

| RATE      | FEE    |
|-----------|--------|
| BASIC FEE | 385.00 |
| XS 9=     |        |
| X43=      |        |
| +145=     |        |
| TOTAL     | 385.00 |

| RATE      | FEE    |
|-----------|--------|
| BASIC FEE | 770.00 |
| XS16=     |        |
| X86=      |        |
| +290=     |        |
| TOTAL     |        |

SMALL ENTITY

OR

OTHER THAN SMALL ENTITY

| RATE             | ADDITIONAL FEE |
|------------------|----------------|
| XS 9=            |                |
| X43=             |                |
| +145=            |                |
| TOTAL ADDIT. FEE |                |

| RATE             | ADDITIONAL FEE |
|------------------|----------------|
| XS18=            |                |
| X86=             |                |
| +290=            |                |
| TOTAL ADDIT. FEE |                |

|  | (Column 1)                       | (Column 2)                         | (Column 3)               |
|--|----------------------------------|------------------------------------|--------------------------|
| AMENDMENT B                                    | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA            |
| Total  |                                  | Minus                              | =                        |
| Independent                                    |                                  | Minus                              | =                        |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |                                  |                                    | <input type="checkbox"/> |

| RATE             | ADDITIONAL FEE |
|------------------|----------------|
| XS 9=            |                |
| X43=             |                |
| +145=            |                |
| TOTAL ADDIT. FEE |                |

| RATE             | ADDITIONAL FEE |
|------------------|----------------|
| XS18=            |                |
| X86=             |                |
| +290=            |                |
| TOTAL ADDIT. FEE |                |

|  | (Column 1)                       | (Column 2)                         | (Column 3)               |
|--|----------------------------------|------------------------------------|--------------------------|
| AMENDMENT C                                    | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA            |
| Total  |                                  | Minus                              | =                        |
| Independent                                    |                                  | Minus                              | =                        |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |                                  |                                    | <input type="checkbox"/> |

| RATE             | ADDITIONAL FEE |
|------------------|----------------|
| XS 9=            |                |
| X43=             |                |
| +145=            |                |
| TOTAL ADDIT. FEE |                |

| RATE             | ADDITIONAL FEE |
|------------------|----------------|
| XS18=            |                |
| X86=             |                |
| +290=            |                |
| TOTAL ADDIT. FEE |                |

- \* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
- \* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
- \* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
- \* The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

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